

Section 3		Verification of Unusual & Necessary Expenses	
Circumstances		Expense Amount	
<input type="checkbox"/>	Medical treatment: provide a copy of the statement(s) from the insurance provider, pharmacy or medical facilities, stipulating the amount of the medical expenses paid that were not covered by insurance or deducted on your 2015 tax return . A copy of your 2015 Schedule A may be requested.	\$	/mo
<input type="checkbox"/>	Private education tuition (K-12): provide a copy of your tuition statement that includes total tuition cost as well as any financial assistance received.	\$	/mo
<input type="checkbox"/>	Tax liens: provide statement from the Internal Revenue Service and/or State Tax Board indicating monthly payment amount on back taxes owed.	\$	/mo
<input type="checkbox"/>	Court ordered payments: provide a copy of receipt of payments.	\$	/mo
<input type="checkbox"/>	Other, please describe: _____	\$	/mo

Section 4		Verification of Income Reduction	
Circumstances			
<input type="checkbox"/>	Unemployment: provide a copy of your employment separation letter, including verification of severance pay or retirement benefits (or the lack thereof), or a copy of a letter or statement establishing the amount of your eligibility for unemployment benefits.		
<input type="checkbox"/>	Disability or Injury: provide copies of statement(s) reflecting your eligibility for benefits, monthly amount received and start and end dates of payments.	\$	/mo
<input type="checkbox"/>	Loss of Other Income: provide a copy of your termination notice of other income (e.g., social security benefits, trust payments, alimony, child support).	\$	
<input type="checkbox"/>	Report of One Time Income: provide a copy of your 2015 1099-R or other financial statement of one time income (e.g., early IRA distribution, conversions and rollovers).	\$	
Divorce, Separation or Death of Spouse: provide the date of the event, and copies of supporting documentation or certificates.			
		Income reported on 2017-2018 FAFSA	Current Financial Situation
Income earned from work by student :		\$	\$
Income earned from work by spouse :		\$	\$
Other taxable income and benefits: Examples include: interest/dividend income, rental income, unemployment, alimony, taxable portion of social security or retirement, etc. Attach an itemized list to include the source and amount if the total contains more than one type.		\$	\$
Non-taxable income and benefits: Examples include: untaxed portion of social security or retirement income, child support, welfare benefits (not food stamps), worker's compensation, and other income not reported on this form. Attach an itemized list to include the source and amount if the total contains more than one type.		\$	\$

Section 5 - Required		Student Certification	
I certify that the above is based on the best information available at this time. I understand that additional documentation may be required to clarify my/our circumstances.			
Student Signature			Date